PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20]	RATE	FEE	7	RATE	FEE
FC)A		NUMBER FILED		NUMBER EXTRA			BASIC FEE	 	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	20 minus 20=		. 6			XS 9=		OR	X\$18=	·
INC	EPENDENT C	LAIMS	Y im	inus 3 =	1			X43=	213	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in (column 2		TOTAL	428	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						(Column 3)		OTHER THAN SMALL ENTITY OR SMALL ENTITY				
Г		CLAIMS	·	HIGH		(Coloniii 3)	1 1			1		
AMENDMENT A	8-200	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL PEE
	Total	. 20	Minus	- 2	0	=		·X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	<u></u>	<u></u>	-		X43= .		ÓR	X86=	
	FINST PRESE	INTATION OF MI	DETIPLE DET	PENDENT	CLAIM		1	+145=		OR	+290=	
								TOTAL			TOTAL	
		(Column 1)		(Cal	0\	(Oalumi 0)	A	DDIT. FEE		,	ADDIT. FEE	
		(Column 1)	ī —	(Colum		(Column 3)	1 -	-		. ,	·	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	** .		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	0. 4.14	=		X43=		OR	X86=	
	FINST PRESE	INTATION OF MC	LI IPLE DEF	ENDENI	CLAIM		ነ	+145=		OR	+290=	
							L	TOTAL DDIT. FEE			TOTAL ADDIT, FEE	
		(Column 1)		(Colum	ın [.] 2)	(Column 3)	^		. •		ODII. FEEL	
AMENDMENT C	` .	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	-	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		5	╽┠			. I		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=	
			• •					+145=	ŀ	OR	+290=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE	
1	he Highest Num	mber Previously Paid	For" (Total or	o SPACE IS Independer	iess thai nt) is the	n 3, enter "3." highest number	r foun	d in the appr	opriate box			